Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OKLAHOMA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself	Identify Yourself				
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Toni First name  L Middle name		First name  Middle name		
	Bring your picture identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years	9				
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3426				

Debtor 1 Toni L Lusk Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	4815 S. 433rd W. Ave.	If Debtor 2 lives at a different address:
		Jennings, OK 74038  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Creek County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

3/17/17 3:21PM

Debtor 1 Toni L Lusk Case number (if known) Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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3/17/17 3:21PM

Debtor 1 Toni L Lusk Case number (if known) Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

3/17/17 3:21f

Part 5: Explain You

Debtor 1

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

Toni L Lusk

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Toni L Lusk				Case	Case number (if known)			
Part	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do 16a. you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or b	usiness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
Do you estimate that after any exempt property is excluded a administrative expense				Do you estimate that after any exempavailable to distribute to unsecured cre	ot property is excluded and administrative expense ditors?			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		□ 1,000-5,000	<b>2</b> 5,001-50,000			
		□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
	How much do you	<b>\$0 - \$5</b>	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 millior				
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million				
20.	How much do you estimate your liabilities	□ \$0 - \$5		\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 millior				
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million				
Part	7: Sign Below							
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that the	e information provided is true and correct.			
					ligible, under Chapter 7, 11,12, or 13 of title 11, nd I choose to proceed under Chapter 7.			
				I not pay or agree to pay someone whethe notice required by 11 U.S.C. § 342	o is not an attorney to help me fill out this (b).			
		I request i	elief in accordance with the	chapter of title 11, United States Cod	e, specified in this petition.			
			y case can result in fines up		oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519			
		Toni L L		Signature of	Debtor 2			
		Executed	on March 17, 2017 MM / DD / YYYY	Executed on	MM / DD / YYYY			

3/17/17 3:21PM

Debtor 1 Toni L Lusk Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joel K. Mitchell	Date	March 17, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Joel K. Mitchell		
Printed name		
Joel K. Mitchell, Attorney-at-Law		
Firm name		
1318 W Main Street		
Collinsville, OK 74021		
Number, Street, City, State & ZIP Code		
Contact phone <b>918-371-1896</b>	Email address	jkm@joelkmitchell.com
Bar number & State		

Certificate Number: 15725-OKN-CC-028664172



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>January 24, 2017</u>, at <u>3:44</u> o'clock <u>PM EST</u>, <u>Toni Lusk</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Oklahoma</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	January 24, 2017	By:	/s/Julio Del Rosario
		Name:	Julio Del Rosario

Title:

Issuer

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

	Case 17-10437-101	Document 1	Filed III OSBC ND/OK 0II 03/17/	717 Page 9 01 46
Fill in this in	formation to identify your	case:		
Debtor 1	Toni L Lusk			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	NORTHERN DIST	RICT OF OKLAHOMA	
Case numbe	r			
(if known)				☐ Check if this is an amended filing
Official I	Form 106Sum			i i
Summar	y of Your Assets	and Liabilities	and Certain Statistical Information	ation 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your as	ssets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,825.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,825.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,193.72
	Your total liabilities	\$	51,193.72
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,082.42
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,792.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
	■ Yes		
7.	What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 **Toni L Lusk** Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total clai	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

# Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 11 of 48

Ell inchise	farmation to identify	and this filian.		3/17/17 3:21PM
	formation to identify you	r case and this filing:		
Debtor 1	Toni L Lusk First Name	Middle Name Last Name		
Debtor 2	r not reamo			
(Spouse, if filing)	First Name	Middle Name Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF OKLAHOMA		
Case number	r			☐ Check if this is an
Case number				☐ Check if this is an amended filing
				-
Official I	Form 1061/P			
_	Form 106A/B	•		
Sched	ule A/B: Prop	perty		12/15
think it fits bes information. If Answer every o	t. Be as complete and accur more space is needed, attack question.	be items. List an asset only once. If an asset fits in more than o rate as possible. If two married people are filing together, both a h a separate sheet to this form. On the top of any additional page	re equally responsible for su	pplying correct
Part 1: Descri	ribe Each Residence, Buildin	ng, Land, or Other Real Estate You Own or Have an Interest In		
1. Do you own	or have any legal or equitab	le interest in any residence, building, land, or similar property?		
■ No. Go to	Part 2			
_	ere is the property?			
	oro to the property.			
Part 2: Desci	ribe Your Vehicles			
□ No ■ Yes				
3.1 Make:	Chevy	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
Model:	Truck	Debtor 1 only	Creditors Who Have Clair	
Year:	1991	Debtor 2 only	Current value of the	Current value of the
• •	imate mileage:nformation:	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
	mornation.	At least one of the deptors and another		
		☐ Check if this is community property	\$1,000.00	\$1,000.00
		(see instructions)		
Examples:  No  Yes  Add the d pages you	Boats, trailers, motors, pers dollar value of the portion u have attached for Part 2	ATVs and other recreational vehicles, other vehicles, and sonal watercraft, fishing vessels, snowmobiles, motorcycle at you own for all of your entries from Part 2, including an 2. Write that number here	y entries for	\$1,000.00
	or have any legal or equi			Current value of the
		itable interest in any of the following items?	ķ	current value of the portion you own? On not deduct secured claims or exemptions.
6. Household	d goods and furnishings			

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

# Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 12 of 48 Debtor 1 Toni L Lusk Case number (if known) Yes. Describe..... \$200.00 Bed \$100.00 Dresser \$150.00 Table and chair 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$200.00 TV 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... \$100.00 Tazer 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Clothes and shoes \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 2

14. Any other personal and household items you did not already list, including any health aids you did not list

☐ Yes. Give specific information.....

■ No

Debtor 1 Toni L Lusk Case number (if known) 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,250.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No \$10.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking account with IBC Bank \$400.00 17.1. Savings account with American Heritage 17.2. Bank \$15.00 Savings account with Hillcrest Credit Union \$150.00 17.3 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: Retirement account (401K) \$7,000.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Toni L Lusk Case number (if known) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information...

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Debte	or 1 _ <b>Toni L Lusk</b>		Case number (if known)	
	laims against third parties, whether or not you have filed a la Examples: Accidents, employment disputes, insurance claims, or		and for payment	
	No Year Decaribe cook alaire			
Ц	Yes. Describe each claim			
	ther contingent and unliquidated claims of every nature, incl	luding counterclaims	of the debtor and rights to set of	f claims
	No Yes. Describe each claim			
	ny financial assets you did not already list			
	No Yes. Give specific information			
_	Tes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includi for Part 4. Write that number here		, ,	\$7,575.00
Part 5	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. <b>D</b> o	you own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property Yol If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. <b>D</b>	o you own or have any legal or equitable interest in any farm	- or commercial fishin	ng-related property?	
•	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	o you have other property of any kind you did not already list	t?		
	No			
Ц	Yes. Give specific information			
54	Add the dollar value of all of your entries from Part 7. Write tl	hat number here		\$0.00
0	Tada tilo dollar valdo or all or your ollarioo from tale from the			Ψ0.00
Part 8	List the Totals of Each Part of this Form			
				*
	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15	\$1,000.00		
	Part 4: Total financial assets, line 36	\$1,250.00 \$7,575.00		
	Part 5: Total hisiness-related property, line 45	\$7,575.00 \$0.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$9,825.00	Copy personal property total	\$9,825.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$9.825.00

Official Form 106A/B Schedule A/B: Property page 5

	3:21	

Fill in this inform	nation to identify your	case:		
Debtor 1	Toni L Lusk			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number				☐ Check if this is an
				amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	on Current value of the Amount of the exemption you claim portion you own		claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exe	emption.	
1991 Chevy Truck Line from Schedule A/B: 3.1	\$1,000.00	<b>=</b> \$1,	,000.00	Okla. Stat. tit. 31, § 1(A)(13)
Line IIIIII Schedule A/B. 3.1		100% of fair market valuary applicable statutory		
Bed Line from Schedule A/B: 6.1	\$200.00	<b>=</b> \$	\$200.00	31 Okla. St. § 1(A)(3)
Line from Scriedule AVB. 0.1		100% of fair market valuary applicable statutory		
Dresser Line from Schedule A/B: 6.2	\$100.00	■	\$100.00	31 Okla. St. § 1(A)(3)
Ellie II olii ochedale A.B. 4.2		100% of fair market valuary applicable statutory		
Table and chair	\$150.00	<b>=</b> \$	\$150.00	31 Okla. St. § 1(A)(3)
Line nom schedule A.B. 0.0		100% of fair market valuary applicable statutory		
TV Line from Schedule A/B: 7.1	\$200.00	<b>=</b> \$	\$200.00	31 Okla. St. § 1(A)(3)
Line nom <i>Schedule AVB.</i> 1-1		100% of fair market valuany applicable statutory		

## Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 17 of 48

Toni L Lusk Case number (if known) Brief description of the property and line on Specific laws that allow exemption Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Tazer** 31 Okla. St. § 1(A)(14) \$100.00 \$100.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Clothes and shoes 31 Okla. St. § 1(A)(7) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Retirement account (401K) Okla. Stat. tit. 31, § 1(A)(20) \$7,000.00 \$7,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit

3.	you claiming a homestead exemption of more than \$160,375? bject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	□ No
	☐ Yes

# Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 18 of 48

Fill in this infor	mation to identify your	case:			
Debtor 1	Toni L Lusk				
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA		
Case number (if known)					☐ Check if this is an
					amended filing

## Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Ca	ase 17-10437-M	Document 1	. Filed in USBC N	1D/OK on 03/17/17	Page 19 of 48
Fill in this info	rmation to identify your	case:			
Debtor 1	Toni L Lusk				
200101	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Loot Name		
(Spouse if, filing)			Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DIS	STRICT OF OKLAHOMA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106E/F				
Schedule I	E/F: Creditors W	ho Have Un	secured Claims		12/15
eft. Attach the Co name and case nu		e. If you have no inf		• • • • • • • • • • • • • • • • • • • •	mber the entries in the boxes on the of any additional pages, write your
	itors have priority unsecure		u?		
■ No. Go to	Part 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORIT	Y Unsecured Clai	ims		
3. Do any credi	itors have nonpriority unsec	cured claims agains	t you?		
☐ No. You h	nave nothing to report in this p	art. Submit this form	to the court with your other sch	edules.	
Yes.					
unsecured cla	aim, list the creditor separately	y for each claim. For	each claim listed, identify what		has more than one nonpriority ns already included in Part 1. If more ms fill out the Continuation Page of
					Total claim
	int Resolution Service	es Last	t 4 digits of account number	7752	\$563.00
•	rity Creditor's Name  Nw 66th Ave	Whe	en was the debt incurred?		
Fort La	auderdale, FL 33313				
	Street City State Zlp Code	As o	of the date you file, the claim	is: Check all that apply	
_	curred the debt? Check one. or 1 only	П	D		
☐ Debto	•		Contingent Jnliquidated		
	or 2 only or 1 and Debtor 2 only		Disputed		
	ast one of the debtors and and		e of NONPRIORITY unsecure	d claim:	
	ck if this claim is for a com		Student loans		
debt			0 0 1	aration agreement or divorce that	you did not
_	aim subject to offset?		ort as priority claims	ng plans, and other similar debts	
■ No					
☐ Yes			Other. Specify COLLECTION	UN ACCOUNT	

Debto	Toni L Lusk		Case number (if know)	
4.2	Ally Financial Nonpriority Creditor's Name	Last 4 digits of account number	0409	\$44,716.00
	200 Renaissance Ctr Detroit, MI 48243	When was the debt incurred?	INSTALLMENT ACCOUNT OPENED 1/2016	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	og plans, and other similar debts	
	□ Yes	Loan partia Silverado, is around \$	ally secured by 2015 Chevrolet mileage- 25,000 - Balance of Ioan 644K but worth only about \$18K. e repossessed but not yet resold.	
4.3	Amazon Card	Last 4 digits of account number	5143	\$228.59
	Nonpriority Creditor's Name c/o Synchrony Bank PO Box 960013 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	<u> </u>	
4.4	Associated Anesthesiologists Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	3200	\$664.44
	6839 South Canton Tulsa, OK 74136	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Uninsured	medical expense	

Debto	Toni L Lusk	Case number (if know)	
4.5	Continental	Last 4 digits of account number 1359	\$1,186.00
	Nonpriority Creditor's Name C/o Security Finance Spartanburg, SC 29304	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify INSTALLMENT ACCOUNT OPENED 4/2016	
4.6	Diagnostic Laboratory Of Oklahoma  Nonpriority Creditor's Name	Last 4 digits of account number 4435	\$19.99
	PO Box 740732	When was the debt incurred?	
	Cincinnati, OH 45274  Number Street City State Zlp Code	As of the date was file the plains in O	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
4.7	Diagnostic Laboratory Of Oklahoma  Nonpriority Creditor's Name	Last 4 digits of account number 0460	\$5.37
	PO Box 740732	When was the debt incurred?	
	Cincinnati, OH 45274		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	Doligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Uninsured medical expense	
	— · - •	— Other. Openity	

Debto	r 1 Toni L Lusk	Case number (if know)	
4.8	Diagnostic Laboratory Of Oklahoma	Last 4 digits of account number 8532	\$552.33
	Nonpriority Creditor's Name PO Box 740732	When was the debt incurred?	
	Cincinnati, OH 45274  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the stain is. Shook all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Uninsured medical expense	
4.9	Medical Data Systems I	Last 4 digits of account number 0067	\$746.00
	Nonpriority Creditor's Name 2150 15th Ave Vero Beach, FL 32960	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify COLLECTION ACCOUNT OPENED 5/2016	
4.1	Pafford Medical Services, Inc.	Last 4 digits of account number 8739	\$1,530.00
	Nonpriority Creditor's Name	When we the daht incorred?	
	PO Box 1120 Hope, AR 71802	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify  Uninsured medical expense	
	Li res	Other. Specify Offinisured medical expense	

1 Toni L Lusk	Case number (if know)	
South Central Emergency Services	Last 4 digits of account number 4459	\$563.0
Nonpriority Creditor's Name 8801 S 101st E Ave Tulsa, OK 74133	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Uninsured medical expense	
Tulsa Adjustment Bureau	Last 4 digits of account number 1223	\$102.0
Nonpriority Creditor's Name 1754 Utica Sq # 283	When was the debt incurred?	
Tulsa, OK 74114  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify COLLECTION ACCOUNT OPENED 10/2015	
Warren Clinic	Last 4 digits of account number N/A	\$317.0
Nonpriority Creditor's Name 6600 S Yale Ave #1500	When was the debt incurred?	
Tulsa, OK 74136  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state of the s	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

■ No

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

 $\hfill \square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Uninsured medical expense

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

# Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 24 of 48

Debtor 1 Toni L Lusk		Case number (if know)			
Account Resolution Services 1801 Nw 66th Ave Fort Lauderdale, FL 33313	Line <u>4.11</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
1 Off Ladderdale, 1 L 33313	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Credit Collection Services	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
725 Canton Street Norwood, MA 02062		■ Part 2: Creditors with Nonpriority Unsecured Claims			
NOI WOOD, IMA 02002	Last 4 digits of account number	8532			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Works and Lentz	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1437 S. Boulder Ave., Ste. 900 Tulsa, OK 74119		■ Part 2: Creditors with Nonpriority Unsecured Claims			
1000, 010 74110	Last 4 digits of account number	8L11			

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims				Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	51,193.72
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	51,193.72

	3:21	

Fill in this informa	ation to identify your					
Debtor 1	Toni L Lusk					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA			
Case number						
(if known)					Check if this is an	
				_	amended filing	

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	01:		<u> </u>	715.0	_
	City		State	ZIP Code	
2.3					<u> </u>
	Name				
	Number	Street			_
	INGILIDOI	Olicci			
	City		State	ZIP Code	
2.4	Oity		Oldio	211 0000	
2.7	Name				_
	IName				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				<del></del>
	Number	Street			<u> </u>
	ivuilibei	Succi			
	City		State	ZIP Code	_
	Oity .		Sidio	<u> </u>	

Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 26 of 48

				3/17/17 3:21PM
is information to identify y	our case:			
Toni L Lusk				
First Name	Middle Name	Last Name		
filing) First Name	Middle Name	Last Name		
tates Bankruptcy Court for the	he: NORTHERN DISTRICT	OF OKLAHOMA		
mber				Check if this is an amended filing
al Form 106H <b>dule H: Your C</b>	odebtors			12/15
re filing together, both are and number the entries in ne and case number (if kno	equally responsible for suppose the boxes on the left. Attachown). Answer every question	olying correct informat n the Additional Page t	tion. If more space is needed, cop to this page. On the top of any Ad	py the Additional Page,
o you have any codebtors	? (If you are filing a joint case,	do not list either spouse	as a codebtor.	
o es				
ona, California, Idaho, Louis o. Go to line 3.	iana, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		d territories include
ne 2 again as a codebtor o	nly if that person is a guaran	tor or cosigner. Make	sure you have listed the creditor	on Schedule D (Official
			☐ Schedule D. line	
Name			Schedule E/F, line	
				<u> </u>
			☐ Schedule G, line	
Number Street City	State	ZIP Code	☐ Schedule G, line	
	State	ZIP Code	_	
	State	ZIP Code	☐ Schedule G, line  ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	Toni L Lusk First Name  tates Bankruptcy Court for the states	First Name Middle Name  tates Bankruptcy Court for the: NORTHERN DISTRICT  mber  al Form 106H  dule H: Your Codebtors  rs are people or entities who are also liable for any debre filing together, both are equally responsible for suppand number the entries in the boxes on the left. Attache and case number (if known). Answer every question by you have any codebtors? (If you are filing a joint case, on the left of the last 8 years, have you lived in a community proma, California, Idaho, Louisiana, Nevada, New Mexico, Purona, California	Toni L Lusk First Name Middle Name Last Name tates Bankruptcy Court for the:  NORTHERN DISTRICT OF OKLAHOMA  The Middle Hamber  MIDDITION TO THE MIDDITION OF OKLAHOMA  MIDDITION OF O	Toni L Lusk First Name Middle Name Last Name laters Bankruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA Indee H: Your Codebtors  The same are quality responsible for any debts you may have. Be as complete and accurate as positing together, both are equally responsible for supplying correct information. If more space is needed, coy and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Active and case number (if known). Answer every question.  To you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.  To be set in the last 8 years, have you lived in a community property state or territory? (Community property states and one, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  To Go to line 3.  To Go to line 4.  To Go to line 5.  To Go to line 6.  To Go to line 7.  To Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you are 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor or 1060). Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule Column 2.

	in this information to identif			
Del	otor 1 Toni	Lusk		
	otor 2 use, if filing)			
Uni	ted States Bankruptcy Cou	for the: NORTHERN DISTR	RICT OF OKLAHOMA	
	se number 		_	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
0	ficial Form 106			MM / DD/ YYYY
S	chedule I: You	Income		12/1:
spo atta	use. If you are separated the a separate sheet to thi	nd your spouse is not filing form. On the top of any add	with you, do not include information	g with you, include information about your about your about your spouse. If more space is needed, ase number (if known). Answer every question
spo atta Pai	use. If you are separated the aseparate sheet to thi	nd your spouse is not filing form. On the top of any add	with you, do not include information	about your spouse. If more space is needed,
spo atta	use. If you are separated the a separate sheet to thi	nd your spouse is not filing form. On the top of any add	with you, do not include information	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse
spo atta Pai	t1: Describe Employment information.  If you have more than on	nd your spouse is not filing form. On the top of any add	with you, do not include information itional pages, write your name and continuate the pages of the page of the pa	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed
spo atta Pai	t1: Describe Employment information.  If you have more than on attach a separate page winformation about addition	nd your spouse is not filing form. On the top of any add ment	with you, do not include information itional pages, write your name and continuate the pages of the page of the pa	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse
spo atta Pai	t1: Describe Employment information.  If you have more than on attach a separate page winformation about addition employers.	nd your spouse is not filing form. On the top of any add ment  job, n Employment status I Occupation	with you, do not include information itional pages, write your name and continuation.  Debtor 1  Employed	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed
spo atta Pai	t1: Describe Employment information.  If you have more than on attach a separate page winformation about addition	nd your spouse is not filing form. On the top of any add ment  job, n Employment status I Occupation	with you, do not include information itional pages, write your name and continuation.  Debtor 1  Employed	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed  Not employed
spo atta Pai	Describe Employment information.  If you have more than on attach a separate page w information about addition employers.  Include part-time, season	nd your spouse is not filing form. On the top of any add rement  job,  Employment status  Occupation  Company of the top of any add rement to the top of add reme	with you, do not include information itional pages, write your name and calculated by the second sec	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filling spouse  Employed  Not employed
spo atta Pai	Describe Employment information.  If you have more than on attach a separate page w information about addition employers.  Include part-time, season self-employed work.  Occupation may include services to the content of the content	nd your spouse is not filing form. On the top of any add rement  job,  Employment status  Occupation  Company of the top of any add rement to the top of add reme	Debtor 1  Employed  Not employed  HILLCREST Healthcare Syste  PO Box 9800  Coral Springs, FL 33075-0800	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed  Not employed
spo atta Pai	Describe Employment information.  If you have more than on attach a separate page winformation about addition employers.  Include part-time, season self-employed work.  Occupation may include or homemaker, if it applie	nd your spouse is not filing form. On the top of any add ment  job,  Employment status  Occupation  Companies and Employer's name  Light Employer's address	Debtor 1  Employed  Not employed  HILLCREST Healthcare System  PO Box 9800 Coral Springs, FL 33075-0800	about your spouse. If more space is needed, ase number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed  Not employed

**List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay. 3.
- Calculate gross Income. Add line 2 + line 3.

	_		non-till	ng spouse
2.	\$	2,576.17	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	2,576.17	\$	N/A

For Debtor 2 or

For Debtor 1

Debt	or 1	Toni L Lusk	-	(	Case	number (if known	) _				
	Con	ny line 4 hore	4		For	Debtor 1		non-f	ebtor : iling s	pouse	
	Cop	y line 4 here	4.		Φ_	2,576.17	_	\$		N/	<u>A</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	71.57	_	\$		N/	
	5b.	Mandatory contributions for retirement plans	5b		\$ \$	0.00	_	\$		N/	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c 5d		\$ _	253.20 0.00	_	\$		N/	
	5e.	Insurance	5e		<b>\$</b> -	168.98	_	\$—		N/	
	5f.	Domestic support obligations	5f.		\$	0.00	_	\$		N/	
	5g.	Union dues	5g	ı.	\$	0.00	_	\$		N/	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	0.00	) +	\$		N/	A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	493.75	5_	\$		N/	<u>A</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,082.42	2	\$		N/	A
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$_	0.00	_	\$		N/	
	8b.	Interest and dividends	8b	).	\$_	0.00	<u> </u>	\$		N/	<u>A</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$_	0.00	_	\$		N/	
	8d.	Unemployment compensation	8d		\$_	0.00	_	\$		N/	
	8e.	Social Security	8e	<del>)</del> .	\$_	0.00	<u> </u>	\$		N/	<u>A</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	)	\$		N/	A
	8g.	Pension or retirement income	8g	١.	\$	0.00	)	\$		N/	Α
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.00	_ +	\$		N/	<u>A</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	0.00	)	\$		N	I/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,082.42 +	\$		N/A	= \$	2,082.42
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•			hedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	2,082.42
13.	Do :	you expect an increase or decrease within the year after you file this form	?							Coml mont	oined hly income
		No. Yes. Explain:									
	Ц	1 ου. Ελριαιιί.									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informat	ion to identify yo	our case:					
Deb	tor 1	Toni L Lusk					ck if this is:	
Dob	tor 2						An amended filing	uing pastpatition abouter
	ouse, if filing)						13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankru	uptcy Court for the	: NORTH	IERN DISTRICT OF OKLA	NHOMA		MM / DD / YYYY	
Cas	e number							
(If k	nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/15
Be info nur	as complete a ormation. If mo mber (if knowr	nd accurate as	possible. eded, atta y question	If two married people ar ch another sheet to this				
Par 1.	Is this a join		enoia					
	■ No. Go to		in a separa	ate household?				
	□ No	)	·	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	dependents?	□ No					
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
							J	□ No
	Do not state t dependents r				Son		8 mos	■ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do vour exp	enses include		N <sub>=</sub>				□ Yes
	expenses of	people other to your depende	han $_{m \Box}$	No Yes				
Par	t 2: Estima	ate Your Ongoi	ng Monthl	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
Inc	lude expenses	s paid for with I	non-cash	government assistance i	f vou know			
the		assistance an		cluded it on Schedule I: )			Your exp	enses
4.		r home owners d any rent for the		ses for your residence. I	nclude first mortgage	e 4. S	\$	0.00
	If not include	ed in line 4:	-					<del></del>
	4a. Real es	state taxes				4a. S	<b>B</b>	0.00
		ty, homeowner's	s, or renter	's insurance		4b. S	·	0.00
				ipkeep expenses		4c. \$		0.00
	4d. Homed	wner's associat	ion or cond	dominium dues		4d. \$	Б	0.00

5. Additional mortgage payments for your residence, such as home equity loans

6a.Electricity, heat, natural gas6a.\$200.006b.Water, sewer, garbage collection6b.\$0.006c.Telephone, cell phone, Internet, satellite, and cable services6c.\$315.006d.Other. Specify:6d.\$0.00	Deb	tor 1	Toni L L	usk	Case num	Case number (if known)				
6a. Electricity, heat, natural gas 6b. Water, sever, garbage collection 6b. S 0.000 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 315.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 315.00 6c. Child-cape and children's education costs 7c. \$ 550.00 7c. Food and housekeeping supplies 8c. \$ 0.00 7c. Food and housekeeping supplies 9c. \$ 100.00 9c. \$ 1	6.	Utilit	ies:							
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, lement, satellite, and cable services 6c. \$ 315,00 6d. \$ 0,00 7. Food and housekeeping supplies 7. \$ 555,00 8. Childcare and children's education costs 8. \$ 0,00 9. Clothing, laundry, and dry cleaning 9. \$ 180,00 10. Personal care products and services 10. \$ 50,00 11. Medical and dental expenses 11. \$ 30,00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car psyments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 30,00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Line insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15b. Health insurance 15c. Vehicle insurance year of the property o	٥.			, heat, natural gas	6a.	\$	200.00			
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. \$ 315.00 6d. Other Specify: 6d. \$ 0.00 7. Food and housekeeping supplies 7. \$ 5.50.00 8. \$ 0.00 9. \$ 5.0		6b.	Water, sev	wer, garbage collection	6b.	\$				
6.6. Other. Specify:		6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$				
7. Food and housekeeping supplies   7. S   550.00		6d.	•		6d.	\$				
8. Childcare and children's education costs  10. Clothing, laundry, and dry cleaning  10. Personal care products and services  10. \$ 50.00  11. \$ 30.00  12. Transportation. Include gas, maintenance, bus or train fare.  12. \$ 275.00  13. \$ 30.00  14. Charitable contributions and religious donations  15. Insurance.  16. Charitable contributions and religious donations  17. Insurance.  18. Le insurance deducted from your pay or included in lines 4 or 20.  18. Le insurance.  18. Le insurance deducted from your pay or included in lines 4 or 20.  18. Le insurance.  18. S 0.00  18. Le insurance.  18. S 0.00  18. Vehicle insurance deducted from your pay or included in lines 4 or 20.  18. Le insurance.  18. S 0.00  18. Vehicle insurance. Specify:  18. Car payments for Vehicle 1  18. Car payments for Vehicle 1  18. Car payments for Vehicle 1  18. Car payments for Vehicle 2  18. Contribution of the cont	7.	Food			7.	\$				
10. Personal care products and services  11. Medical and dental expenses  12. Transportation. Include gas, maintenance, bus or train fare.  13. Do not include car payments.  14. \$ 275.00  15. Entertainment, clubs, recreation, newspapers, magazines, and books  16. Charitable contributions and religious donations  17. \$ 30.00  18. \$ 30.00  19. Transportation. Include gas, maintenance, bus or train fare.  19. \$ 30.00  1	8.				8.	\$	_			
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. S 275.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S 30.00 14. Charitable contributions and religious donations 15. Insurance. 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 16a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Ufter insurance. Spacity: 15d. Outon tinclude taxes deducted from your pay or included in lines 4 or 20. 15d. Life insurance. 15d. Ufter insurance. Spacity: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes in post included in lines 4 or 20. 15d. Taxes in post included in lines 4 or 20. 15d. Taxes in post included in lines 4 or 20. 15d. Taxes in post included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Taxes in post included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Taxes in post included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Mortgages on other property 15d. Taxes in post in pos	9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	180.00			
11. Medical and dental expenses   11. \$   30.00	10.	. Personal care products and services 10. \$ 50.00								
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.   13. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$   30.00     14. \$   0.00     15. Insurance.   0.00     15. Leath insurance deducted from your pay or included in lines 4 or 20.     15. Leath insurance   150. \$   0.00     15. Health insurance   150. \$   0.00     15. Taxes. Do not include tasset deducted from your pay or included in lines 4 or 20.     15. Taxes. Do not include tasset deducted from your pay or included in lines 4 or 20.     15. Taxes. Do not include tasset deducted from your pay or included in lines 4 or 20.     15. Specify   16. \$   0.00     17. Car payments for Vehicle 1   17a. \$   0.00     17b. Car payments for Vehicle 2   17b. \$   0.00     17c. Other. Specify:   17c. \$   0.00     17c. Other. Specify:   17c. \$   0.00     17d. Other. Specify:   17c. \$   0.00     17d. Other. Specify:   17c. \$   0.00     17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule ( Your Income (Official Form 106)).   18. \$   0.00     18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule ( Your Income (Official Form 106)).   18. \$   0.00     19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule ( Your Income.   19.   0.00     20b. Real setate taxes   20b. \$   0.00     20b.	11.	1. Medical and dental expenses 11. \$ 30.00								
Do not include car payments.  12. \$ 275.00  13. \$ 13. \$ 30.00  14. Charitable contributions and religious donations  14. \$ 0.00  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 0.00  15c. Vehicle insurance  15c. \$ 162.00  15d. University insurance  15d. \$ 0.00  15d. University insurance  15d. \$ 0.00  15d. Other insurance. Specify:  15d. \$ 0.00  15d. Other insurance. Specify:  16. \$ 0.00  17d. Other. Specify:  17a. Car payments for Vehicle 1  17a. \$ 0.00  17b. Car payments for Vehicle 2  17c. \$ 0.00  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments on a laminous pay on line 5, Schedule I, Your Income (Official Form 106i).  18. Your payments on the property  20a. Margages on other property  20b. Real estate taxes  20c. \$ 0.00  20c. Property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20c. Property, homeowner's, or renter's insurance  20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  22a. Add lines 4 through 21.  23b. Copy line 12 (monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your expenses within the year of do you expect your montagage payment to increase or decrease because of a mondification to the terms of your montagage?				•		· —	<del></del>			
14.   Sample   15.   16.   15.   16.   15.   16.   15.   16.   1					12.	\$	275.00			
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. S 0.00 15b. Health insurance 15c. Vehicle insurance 51cb. \$ 0.00 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 17d. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. S	13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	30.00			
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23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy your monthly expenses from line 22c above.  23b. Copy your monthly expenses from your monthly income.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly net income.  23c. \$ 2,082.42  23b\$ 1,792.00  23c. \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.							1 702 00			
23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ 2,082.42  23b\$ 1,792.00  \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		220.	Add line 226	a and 22b. The result is your monthly expenses.		Ψ—	1,732.00			
23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.	23.	Calc	ulate your ı	monthly net income.						
23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$				
The result is your <i>monthly net income</i> .  23c. \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	1,792.00			
The result is your <i>monthly net income</i> .  23c. \$ 290.42  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		23c.	Subtract v	your monthly expenses from your monthly income.						
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.			,		23c.	\$	290.42			
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.	24	Do v	nu evnect r	an increase or decrease in your expenses within the yea	r after you file this	s form?				
■ No.	∠4.	For ex	xample, do yo	ou expect to finish paying for your car loan within the year or do you ε			increase or decrease because of a			
		_								
				Explain here:						

Fill in this infor	mation to identify your	case:			
Debtor 1	Toni L Lusk				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA		
Case number					
(if known)					Check if this is an amended filing
Official For		an Individual	Debtor's Sc	hadulas	12/15
Jeelal a	tion About 6	iii iiidividaai	DCDtOI 3 OC	ricadics	12/15
Sig	ın Below				
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				
				Declaration, and Signa	ition Preparer's Notice, ature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration and	
•	re true and correct.	that I have read the sum	mary and schedules file		
that they ar	re true and correct.	that I have read the sum	·	d with this declaration and	
that they ar X <u>/s/ Tor</u> Toni L	re true and correct. ni L Lusk	that I have read the sum	x	d with this declaration and	

Fill in	n this infor	mation to identify you	r case:					
Debte	or 1	Toni L Lusk						
		First Name	Middle Name		Last Name			
Debte	or 2 se if, filing)	First Name	Middle Name		Last Name			
` '				DIOT OF O				
Unite	d States B	ankruptcy Court for the:	NORTHERN DISTI	RICT OF OR	KLAHOMA			
	number							
(if knov	vn)						_	neck if this is an
							am	nended filing
		orm 107						
Sta	temen	t of Financial	Affairs for Inc	dividua	Is Filing for B	ankruptcy		4/1
					ing together, both are			
		more space is needed /n). Answer every que	•	eet to this f	orm. On the top of any	additional pages,	write your	name and case
		, , ,						
Part	Give	Details About Your Ma	arital Status and Whei	e You Live	d Before			
1. V	What is you	ur current marital state	us?					
Г	☐ Marrie	d						
Ī	■ Not ma							
2. [	Ouring the	last 3 years, have you	lived anywhere other	than where	e you live now?			
ı	No							
[	☐ Yes. Li	ist all of the places you	lived in the last 3 years	. Do not incl	ude where you live now	<b>'</b> .		
	Debtor 1 F	Prior Address:	Dates Del	otor 1	Debtor 2 Prior Ad	dress:		Dates Debtor 2
			lived ther	е				lived there
3. V	Vithin the	last 8 years, did you e	ver live with a spouse	or legal eq	uivalent in a commun	ity property state of	or territory?	? (Community property
states	and territo	ries include Arizona, Ca	alifornia, Idaho, Louisiar	na, Nevada,	New Mexico, Puerto Ri	co, Texas, Washing	ton and Wis	sconsin.)
	No							
[	_	lake sure you fill out Sc	hedule H: Your Codebt	ors (Official	Form 106H).			
			_					
Part	2 Expla	ain the Sources of You	ır Income					
4. [	Did you ha	ve any income from e	mployment or from op	erating a b	usiness during this ye	ear or the two prev	ious calend	dar years?
F	ill in the to	tal amount of income yo	ou received from all jobs	s and all bus	sinesses, including part-	time activities.		•
'	i you are iii	ing a joint case and you	i nave income that you	receive toge	ether, list it only once un	ider Deblor 1.		
ı	No							
[	☐ Yes. F	ill in the details.						
			Debtor 1			Debtor 2		
			Sources of income	Gr	oss income	Sources of inco	me	Gross income
			Check all that apply.	`	efore deductions and clusions)	Check all that app	oly.	(before deductions and exclusions)
				ex	Giusions)			and exclusions)

still owe paid

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

Nο

☐ Yes. List all payments to an insider.

**Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

Yes. List all payments to an insider

**Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment Include creditor's name still owe paid

Case 17-10437-M Document 1 Filed in USBC ND/OK on 03/17/17 Page 34 of 48 Debtor 1 Toni L Lusk Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Date Value of the **Describe the Property** property Explain what happened Ally Financial 01/2017 \$18,000,00 2015 Chevy Silverado 200 Renaissance Ctr Detroit, MI 48243 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Official Form 107

more than \$600 Charity's Name

Describe what you contributed

Value

Dates you contributed

Address (Number, Street, City, State and ZIP Code)

Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total

Der	otor 1 I oni L Lusk		Cas	se number (if	known)	
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you	ı lose anythi	ing because of the	ft, fire, other disaste
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Descril	pe any insurance coverage for the loss	3	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. List ce claims on line 33 of Schedule A/B: Pro		loss	los
Par	t 7: List Certain Payments or Transfer	rs				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparin	g a bankruptcy petition?			erty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propert transferred	У	Date payment or transfer was made	Amount o paymen
	Joel K. Mitchell, Attorney 1318 W Main Street Collinsville, OK 74021		attorney retainer		10/21/2016	\$400.00
	Joel K. Mitchell, Attorney 1318 W Main Street Collinsville, OK 74021		attorney balance		02/10/2017	\$900.00
	001 Debtoredu LLC 372 Summit Ave Jersey City, NJ 07306		pre-bankruptcy credit counseling	g	01/24/2017	\$14.95
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed to be not include any payment or transfer that	ditors or	to make payments to your creditors?		transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propert transferred	у	Date payment or transfer was made	Amount o paymen
18.		ruptcy, d	id you sell, trade, or otherwise transfe	r any prope	rty to anyone, othe	er than property
	transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	rs made a	is security (such as the granting of a secu	urity interest	or mortgage on you	r property). Do not
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address				ny property or eceived or debts	Date transfer was made
	Person's relationship to you			paid in excl		muuu

Debtor 1 Toni L Lusk Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.					
	Name of trust	Description and value of the propert			ferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and S	torage Unit	s	
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
Par	Part 9: Identify Property You Hold or Control for Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)		Describe the property		Value
Par	t 10: Give Details About Environmental Info	rmation				
or	the purpose of Part 10, the following definition	ons apply:				

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 **Toni L Lusk** Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environme						
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of ar	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	ronmental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	y of the following connections to any	/ business?		
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnershi	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exec	utive of a corporation				
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation				
	No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name Daddress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.			
		lame of accountant or bookkeeper	Dates business existed			
<ol> <li>Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Incinstitutions, creditors, or other parties.</li> </ol>				ude all financial		
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Debtor 1	Toni L Lusk	Case number (if known)
Part 12:	Sign Below	
are true ar with a ban	nd correct. I understand that ma	f Financial Affairs and any attachments, and I declare under penalty of perjury that the answers ng a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Toni I	L Lusk	
Toni L L Signature	usk of Debtor 1	Signature of Debtor 2
Date Ma	arch 17, 2017	Date
<b>Did you at</b> ■ No □ Yes	tach additional pages to <i>Your</i> S	tement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pa	ay or agree to pay someone who	s not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

ebtor 1	Toni L Lusk			
	First Name	Middle Name	Last Name	
ebtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
ase number known)				☐ Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of property	<ul><li>□ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	☐ Yes
securing debt:	— Retain the property and [explain].	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Debtor 1 Toni L Lusk	Case number (#	f known)
name:  Description of property securing debt:	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	☐ Yes
n the information below. Do not list real es	operty Leases that you listed in Schedule G: Executory Contracts and Unc state leases. Unexpired leases are leases that are still in effe operty lease if the trustee does not assume it. 11 U.S.C. § 30	ect; the lease period has not yet ended.
Describe your unexpired personal propert	y leases	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Part 3: Sign Below  Juder penalty of perjury, I declare that I ha property that is subject to an unexpired lea	ve indicated my intention about any property of my estate these.	
X /s/ Toni L Lusk  Toni L Lusk  Signature of Debtor 1	X Signature of Debtor 2	
Date March 17, 2017	Date	

### Notice Required by 11 U.S.C. § 342(b) for **Individuals Filing for Bankruptcy** (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**

	Norther	n District of Oklahom	a		
In re	e Toni L Lusk		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTOR	NEY FOR DE	ERTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of o	I certify that I am the attornous of the petition in bankruptcy,	ey for the above nam or agreed to be paid	ned debtor(s) and that to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,300.00	
	Prior to the filing of this statement I have received		\$	1,300.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	sation with any other person t	unless they are mem	bers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul><li>a. Analysis of the debtor's financial situation, and rendering</li><li>b. Preparation and filing of any petition, schedules, statemed</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul>	ent of affairs and plan which	may be required;		
6.	By agreement with the debtor(s), the above-disclosed fee do representation in any other court case, inc county or district court; any work after clos by Debtor's failure to timely complete and cost associated with credit counseling.	luding any adversary pro sure of the case, includi	oceeding in this C ng any motion to	reopen or any work created	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any asbankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
ı	March 17, 2017	/s/ Joel K. Mitchel	I		
1	Date	Joel K. Mitchell			
		Signature of Attorney Joel K. Mitchell, Attorney-at-Law			
		1318 W Main Stree Collinsville, OK 74			
		918-371-1896 Fax			
		jkm@joelkmitche			
		Name of law firm			

Revised 02/2012

# **United States Bankruptcy Court**

	Nor	thern District of Oklahoma		
In re <b>Toni</b>	L Lusk	Debtor(s)	Case No. Chapter 7	
	VERIFICATION	N AS TO OFFICIAL CREE	ITOR LIST	
	•	Original		
		Amendment		
		Add □ Delete	,	
	eby certify under penalty of perjury ion application, or uploaded to the Enowledge.			
responsibility	ther acknowledge that (1) the accurate of the debtor and the debtor's attorous schedules and statements require	ney, (2) the court will rely on	the creditor listing for all mails	ings, and (3)
	is filing is an amendment to the cr is time. (For verification purposes			
16	# of Creditors (or if amended, # o	f creditors added)		
b)	X uploaded to Electronic Case Creditor List Submission app	lication (to be used by Pro Se or available in the Clerk's Off		bsite at
/s/ Toni L Lus	sk			
Debtor Sign		Joint Debtor Signature		_
Address:(if 1	not represented by an attorney)	Address:(if not represe	ented by an attorney)	
Phone:(if no	t represented by an attorney)	Phone:(if not represen	ted by an attorney)	_
/s/ Joel K. Mi	tchell	Date: March 17, 2017		_
Attorney Sig				
Joel K. Mitch Joel K. Mitch	iell, Attorney-at-Law	[Check if applicable] Creditors with for	eign addresses included	
1318 W Main	Street			
Collinsville, 0 918-371-1896	OK 74021-0000 S			
918-371-1895	5			
jkm@joelkmi	itchell.com			

Account Resolution Services 1801 Nw 66th Ave Fort Lauderdale, FL 33313

Account Resolution Services 1801 Nw 66th Ave Fort Lauderdale, FL 33313

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Amazon Card c/o Synchrony Bank PO Box 960013 Orlando, FL 32896

Associated Anesthesiologists Inc. 6839 South Canton Tulsa, OK 74136

Continental C/o Security Finance Spartanburg, SC 29304

Credit Collection Services 725 Canton Street Norwood, MA 02062

Diagnostic Laboratory Of Oklahoma PO Box 740732 Cincinnati, OH 45274

Diagnostic Laboratory Of Oklahoma PO Box 740732 Cincinnati, OH 45274

Diagnostic Laboratory Of Oklahoma PO Box 740732 Cincinnati, OH 45274

Medical Data Systems I 2150 15th Ave Vero Beach, FL 32960

Pafford Medical Services, Inc. PO Box 1120 Hope, AR 71802

South Central Emergency Services 8801 S 101st E Ave Tulsa, OK 74133

Tulsa Adjustment Bureau 1754 Utica Sq # 283 Tulsa, OK 74114

Warren Clinic 6600 S Yale Ave #1500 Tulsa, OK 74136

Works and Lentz 1437 S. Boulder Ave., Ste. 900 Tulsa, OK 74119